

Lincoln Police Department Thomas K. Casady, Chief of Police 575 South 10th Street Lincoln, Nebraska 68508

402-441-7204 fax: 402-441-8492



MAYOR COLEEN J. SENG

lincoln.ne.gov

November 29, 2006

Mayor Seng and City Council City of Lincoln City County Building Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of South Street Liquor, 1000 South Street requesting a class pliquor license.

Fiseha Tesfatsion has purchased the business and requests that he be approved as the manager of the liquor license.

Background information on the applicant is as follows:

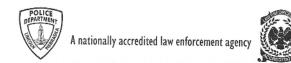
Fiseha Tesfatsion was born in Asmara, Eritrea. He attended Stratford Career Institute graduating in 1999.

Fiseha Tesfatsion employment history is as follows:

2004 - Present	Self employed	Temple, TX. Lincoln, NE.
1999 - 2004	Manager, Red Coleman's	Dallas, TX.
2004	Plane Cleaning, Globe Aviations	Irving, TX.
2001	Driver, Lisa Trucking	Fort Worth, TX.
1998	Clerk, Star Parking	Dallas, TX.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police



Page: 1 Document Name: untitled

STATE OF NEBRASKA LIQUOR CONTROL COMMISSION

INQUIRE

LICENSE NUMBER

RETAIL

75044

OWNERSHIP C I - INDIVIDUAL

CLASS C ALCOHOLIC LIQ ON/OFF SALE

P - PARTNERSHIP

(INSIDE CORPORATE LIMITS)

C - CORPORATION

BOND COMPANY

START DATE CANCEL DATE

BOND NUMBER

* * * RESTRICTIONS Per phone - amend application to class" D"
with Ody John Boekm Mary

* * * * * * * * PREMISE INFORMATION * * * * *

TRADE NAME SOUTH STREET LIQUOR

ADDRESS-1 1000 SOUTH STREET ADDRESS-2

CITY

LINCOLN

COUNTY 02 LANCASTER ZIP 68508

PHONE

402 476 9463

FAX

MAIL TO:

NAME BNW CORPORATION

LINCOLN

ADDRESS-1 1000 E ST, APT 7 ADDRESS-2 1000 SOUTH STREET

STATE NE ZIP 68502

* * * * * * * * * * * * LICENSE DESCRIPTION * * * * * * * * * * * *

ONE STORY BUILDING APPROX 41 X 42 INCLUDING BASEMENT APPROX 41 X 22

COPR. OWN LEASE REPLACING

SUSPENDED LICENSE EXP

Y OR N) (Y OR N) DATE

N

11302011 33661 044

NOTE: KL - WAIVE REQUEST & CRIM HIST

DEPRESS: ENTER - PROCESS PF12 - HISTORY PA1 - RETURN TO MENU



Date: 11/28/2006 Time: 01:27:37 PM

| Liquor License Investigation |
|--|
| Business (DBA) South STREET Liquol |
| Manager Other |
| Name: FISEHA TESFATSION |
| US Citizen? Yes No |
| Has applicant ever been cited for liquor law violations? No Yes Explain |
| Does applicant have an interest in another liquor license? No Yes Explain |
| Is spouse qualified to hold a license? Yes No N/A |
| How is applicant if not an owner to be paid? Salary Hourly |
| How many hours will applicant be at the establishment? 70# |
| Any other employment ?(No) Yes,explain |
| Any previous experience with a liquor license? Yes No |
| Any criminal convictions ? (No Yes Comments_ |
| Is applicant a property owner in Lincoln? Yes No |
| Is applicant involved in any civil litigation? No Yes Comments |
| () Photo () Records Check () References |
| Comments |
| Interview Date /1 / 29 / 06 |



CITY CLERK'S OFFICE LINCOLN, NEBRASKA



Set date 12/4 PH 12-18-06 STATE OF NEBRASKA

NEBRASKA LIQUOR CONTROL COMMISSION

Hobert B. Rupe Executive Director

301 Centennial Mall South, 5th Floor P.O. Box 95046 Lincoln, Nebraska 68509-5046 Phone (402) 471-2571

Fax (402) 471-2814

TRS USER 800 833-7352 (TTY) web address: http://www.lcc.ne.gov/

November 16, 2006

Lincoln City Clerk 555 South 10th Street Lincoln, NE 68508

A6-126197

RE: Application for Class C License for BNW Corporation DBA South Street Liquor

1000

Dear Local Governing Body:

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

- Publicize one time no less than 7 days, and no more than 14 days prior to date of hearing. 1)
- You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-2) 134). You may choose NOT to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- There is a recommendation of denial from the local governing body. 1)
- 2) A citizens protest; or
- 3) Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE PROPERLY LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

- 1) Upon payment of the license fees;
- 2) Physical possession of the license;
- 3) Effective date on the license.

Sincerely,

NEBKAŞKA LIQUOR CONTROL COMMISSION

Katie Danning

Licensing Division

Enclosures

Rhonda R. Flower Commissioner

Bob Logsdon

Chairman

R.L. (Dick) Coyne Commissioner

NOV 1 5 2006

LICENSE APPLICATION CHECKLIS

Applicant Name BNW Corporation Telephone # (AEBRASK&LIQUOF) CONTROL COMMISSION Trade Name South Street Liquor Previous Trade Name South Street Liquor

Provide all the items requested. Failure to provide any item will cause this application to be returned or placed on hold. All documents must be legible. Any false statement or omission may result in the denial, suspension, cancellation or revocation of your license. Your operation depends on receiving a liquor license the Nebraska Liquor Commission cautions you that if you purchase, remodel, start construction, spend or commit money that you do so at your own risk. Prior to submitting your application review the application carefully to ensure that all sections are complete, and that any omissions or errors have not been made. All applications & attachments must be submitted in triplicate. You may want to check with the city/village or county clerk, where you are making application, to see if any additional local requirements must be met before submitting application to the state.

REQUIRED ATTACHMENTS

| LACI. | THEM MOST BE CHECKED OFF AND INCLUDED OR MARKED N/A FOR NOT APPLICABLE |
|-------------|--|
| V 1. | Fingerprint cards for each person (two cards per person) must be enclosed with a separate check payable to the Nebraska State Patrol for processing in the amount of \$38.00 for each person. All areas must be completed on cards as per brochure. To prevent the delay in issuing your license, we strongly suggest you go to a Nebraska State Patrol Agency or law enforcement agency listed in the fingerprint brochure. |
| v 2. | Enclose registration and license fees for the appropriate class of license, made out to the Nebraska Liquor Control Commission. |
| ∠ 3. | Enclose the appropriate additional application forms; Individual License - Form 1; Partnership License - Form 2; Corporate LLC License - Form 3a and Manager application - Form 3b(with corporate application only). LLC application must include all members. |
| V 4. | If building is being leased send a copy of the lease. Be sure it is in the individual(s) or corporate name being applied for. Also, the lease must extend through the license year being applied for. If building is owned, send a copy of the deed or purchase agreement in the appropriate name. |
| <u>マ</u> 5. | If you are buying the business of a current licensee, provide a copy of the purchase agreement from licensee. This also needs to be in applicant's name. |
| | Enclose a copy of the temporary agency agreement, if applicable. Must be on Commission form only. Include a copy of the signature card from the bank showing both the sellers and buyers name(s) on account. |
| 7. | Copy of alcohol inventory being purchased. Inventory shall include brand names and container sizes. Inventory may be taken at the time application is being submitted. |
| 8. | Enclose a list of any inventory or property owned by other parties that are on the premise. |
| 9. | For individual and partnership applications enclose proof of citizenship birth certificates, or naturalization documents for all persons listed on application. Documents must be a certificate from the State, where born, not hospital certificate. |
| | |

- 10.If a corporation enclose a copy of the articles of incorporation. This document must show receipt (barcode) by the Secretary of States Office.
- Mail checklist, all applications and attachments to: Nebraska Liquor Control Commission, 301 Centennial Mall South, PO Box 95046, Lincoln NE 68509-5046

I acknowledge that this application is not a guarantee that a liquor license will be issued to me, and that the average processing period is 45-60 days. Furthermore, I understand that all the information is truthful and I accept all responsibility for any false documents.

Signature

RECEIVED

NOV 1 5 2006

NEBRASKA LIQUOR CONTROL COMMISSION

APPLICATION FOR LIQUOR LICENSE

NEBRASKA LIQUOR CONTROL COMMISSION 301 CENTENNIAL MALL SOUTH PO BOX 95046

LINCOLN, NE 68509-5046 PHONE: (402) 471-2571 FAX: (402) 471-2814 Website: www.lcc.ne.gov

OFFICE USE ONLY

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NOV 1 5 2006

NEBRASKA LIQUOR CONTROL COMMISSION

| edings (more and a | ************************************** | | | | |
|--|--|---|--|------------------------------|--|
| CLA | SS OF | LICENSE FOR WHICH APPLICATION IS MA | DE AND I | FFFC | |
| | | CHECK DESIRED CLASS(S) | | | |
| RET | AIL LI | (CENSE(S) | | 17.3 (F. 17.3 (F. 17.3) | |
| | \mathbf{A} | Beer, On Sale Only | \$45.00 | | |
| В | | Beer, Off Sale Only | \$45.00 | | |
| X | \mathbf{C} | Beer, Wine & Distilled Spirits, On & Off Sale | \$45.00
\$45.00
\$45.00 | | |
| <u>X</u> 17 | D | Beer, Wine & Distilled Spirits, Off Sale Only | | | |
| | 1 | Beer, Wine & Distilled Spirits, On Sale Only | \$45.00
\$45.00 | | |
| Class | s K Cat | ering license may be added to any of these classes | with an a | dditional foo | |
| of \$1 | 00.00 a | nd filing form 35-4202 | ************************************** | aditional fee | |
| MIS | CELLA | ANEOUS | | Bond | |
| | L | Craft Brewery (Brew Pub) | \$295.00 | 1,000 min. | |
| | 0 | Boat | \$ 95.00 | N/A | |
| | \mathbf{V} | Manufacturer, Beer, Wine & Distilled Spirits | \$ 45.00 | 10,000 min | |
| | (addi | tional fee of \$100 to \$1,000-call for exact amount) | ψ 15100 | 10,000 11111 | |
| | w | Wholesale Beer | \$545.00 | 5,000 min. | |
| | \mathbf{X} | Wholesale Liquor | \$795.00 | 5,000 min. | |
| | Y | Farm Winery | \$295.00 | 1,000 min. | |
| All C | lass C l | licenses expire October 31st | | | |
| | | enses expire April 30 th | | | |
| | | pire same as underlying retail license | | | |
| TYPI | EOFA | PPLICATION BEING APPLIED FOR (CHECK | ONE | | |
| | Indiv | idual License, requires insert form 1 | O11 L) | | |
| | | nership License, requires insert form 2 | | | |
| V | Corp | orate License, requires insert form 3a and manage | ar annlica | tion 2h | |
| ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | | | и арриса | 1011 30 | |
| NAM
Commi | E OF I | PERSON OR FIRM ASSISTING WITH APPLICATE this person with any questions we may have) | ATION | | |
| Name | e: John I | M. Boehm Phone: (402) 475 | 5-0811 | inna Andria (1949), v School | |
| Firm | Name: | Butler, Galter, O'Brien & Boehm | | 75730 | |
| | | | | | |
| Firm | addres | s: 811 South 13th St., Lincoln, NE 68508 | | | |

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| PREMISE INFORMATION Trade Name (doing business as) South Street Liquor | NOV 1 5 2006 |
|---|--|
| Street Address #1 1000 South Street | NEBRASKA LIQUOR
CONTROL COMMISSION |
| Street Address #2 | COMPLOT COMPANSOICE |
| City Lincoln County Lancaster | |
| Zip Code 68508 | |
| Telephone number at premise to be licensed (402) 476-9463 | |
| Is this location inside the city/village corporate limits: VES | NO |
| Mail to Address (where you want receipt of Liquor Control Commission mailings) Name: BNW Corporation | MANTEN DE STAN DE CONTRACTOR D |
| Street Address #1 1000 South Street | 747 |
| Street Address #2 1228 "E" Street, Apt. #7 | |
| City Lincoln County Lancaster | |
| Zip Code 68502 | |
| DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICE in the space provided or on an attachment draw the area to be licensed. This should in areas, basement, sales areas and areas where consumption or sales of alcohol will take a portion of the building is to be covered by the license, you must still include dimension width) of the licensed area as well as the dimensions of the entire building in situations or | nclude storage
place. If only
ons (length x |
| | The state of the s |
| | |
| | |
| Attached | |
| | |
| | |
| | |

APPLICANT INFORMATION

| | The state of the s | |
|-----------------------------------|--|---|
| 1. | READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY. | - |
| of or
misde
or res
and n | nyone who is a party to this application, or their spouse, <u>EVER</u> been convicted plead guilty to any charge. Charge means any charge alleging a felony, emeanor, violation of a federal or state law; a violation of a local law, ordinance solution. List the nature of the charge, where the charge occurred and the year nonth of the conviction or plea. Also list any charges pending at the time of pplication. If more than one party, please list charges by each individual's | Andrews and the second |
| Sp
Sp | Yes If yes, please explain below or attach a separate page. No seha Tesfatsion peeding; Temple, TX; February 2006 peeding; Geneva, NE; October 2006 pinsurance card; Dallas, TX; May 1999 NOV 15 | 2006 |
| | NEBRASKA
CONTROL CO | MMISSION |
| 2. | Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required). Liquor Inventory may be taken at time of application being submitted. Yes Current business name and license number South Street Liquor D-33661 No | |
| 3. | Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license. If yes, attach agreement. Please note: This agreement is not effective until Commissions assigns you a 3-digit ID number. Yes No | |
| 4. | Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender. Yes | |
| ~ | No | |

| 5. | Will any person or entity other than applicant be entitled to a share of the profits of this business? If yes, explain. All involved members must be disclosed on application. Yes No |
|----------|--|
| 6. | Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner. Yes |
| V | No |
| 7. | Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain? (No silent partners) Yes |
| | No |
| 8. | Are the premises to be licensed within 150 ft of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Neb. Rev. Stat. 53-177. Yes |
| V | No |
| 9. | Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the person's exact duties. Yes No |
| 10. | List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the individual(s) who will be authorized to write checks and/or make withdrawals on accounts at the institutions. Bank of the West Fiseha Tesfatsion |
| İ. | List all past and present liquor licenses held in Nebraska or any other state by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held. Temple, TX; Fiseha Tesfatsion; BQ579720 - beer and wine; sold business Dallas, TX; Semirna Corp.; Wine, Q25710550, beer, VS571051; sold business |



| 12. | List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be or premises supervising operations. Fiseha Tesfatsion; 48-60 hours | he NOV 15 2006
n the
NEBRASKA LIQUOR
CONTROL COMMISSION |
|-----|--|--|
| 13. | List the training or experience (when and where) of the person listed in | #12 above |

in connection with selling and/or serving alcohol products.

Worked in beer & liquor factory for 21 years, sales and sales manager

Worked in convenience stores since 1998

Operated store in Dallas, TX two years; beer & wine
 Operated store in Temple, TX 15 months; beer and wine

Attended six hour class, four times as required by Texas Alcoholic Beverage Commission

If the property for which this license is sought is owned, submit a copy of the 14. deed, or proof of ownership. If leased, submit a copy of the lease covering the entire license year. Documents must show title or lease held in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed

| V | Lease: expiration date A | 10030 2011 | |
|--|---------------------------|------------|--|
| | Deed |) | |
| | Purchase Agreement | | |
| Management of the Confession o | | | |

15. When do you intend to open for business? November 7, 2006

What will be the main nature of business? What are the anticipated hours of 16. operation? Retail liquor sales

List the principal residence(s) for the past 10 years for all persons required to sign 17. application, including spouses. If necessary attach a separate sheet

| | | article a bopair | ite sifect. | |
|-------------------|---|------------------|-------------|-----------------|
| Applicant Name | | From: Year | To: Year | City/State |
| Fiseha Tesfatsion | | 1962 | | Asmara, Eritrea |
| Fiseha Tesfatsion | | 1997 | 2005 | Dallas, TX |
| Fiseha Tesfatsion | | 2005 | 2006 | Temple, TX |
| Fiseha Tesfatsion | | 2006 | 2006 | Lincoln, NE |
| | | | | |
| | | | | |
| | - | | | |

The undersigned applicant(s) hereby consent(s) to a background investigation and release present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance

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NOV 15 2006

of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State SKA LIQUOR. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete, inaccurate or fraudulent.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

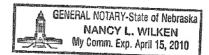
Must be signed in the presence of a notary public by applicant(s) and spouse(s). If partnership or LLC (Limited Liability Company), all partners, members and spouses must sign. If corporation all officers, directors, stockholders (holding over 25% of stock) and spouses. Full (birth) names only, no initials.

| Jul 1112 | |
|-------------|-------------|
| (sign here) | (sign here) |

Subscribed in my presence and sworn to before me this

day of November, 2006

Oway Fublic Signature & Seal



In compliance with the ADA, this application for ficense form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

APPLICATION FOR LIQUOR LICENSE CORPORATION/LLC INSERT - FORM 3a

NEBRASKA LIQUOR CONTROL COMMISSION 301 CENTENNIAL MALL SOUTH PO BOX 95046 LINCOLN, NE 68509-5046 PHONE: (402) 471-2571 FAX: (402) 471-2814 Website: http://www.lcc.nc.gov/ RECEIVED

NOV 1 5 2006

NEBRASKA LIQUOR
CONTROL COMMISSION

| Name of Corporation or Limited Liability Con
Articles of Incorporation. (Document must sh | npany that will hold lid
low [barcode] receipt b | cense. Attach | copy of States Office. |
|--|---|---|------------------------|
| BNW Corporation | | | |
| Corporate Street Address: 1000 South Street | | *************************************** | |
| City: Lincoln | State: NE | _Zip Code: 68 | 3502 |
| Corporate Telephone Number 214-808-4709 | | <u>-</u> , - 1 | |
| Total number of shares issued (if corporation) | 1,000 | | |
| Is this a Non Profit Corporation? YES If yes, what is your Federal ID #? | ₽NO , | _ | |
| Name of Registered Agent John M. Boehm | | | |
| Name of Proposed Manager Fiseha Tesfatsion This person must complete form 35-4013 | | | |
| List name of Chief Executive Officer | | | |
| ast Name: Tesfatsion | First Name: | Fiseha | _MI_ |
| Address Street 1228 "E" Street, Apt. 7 | City Lincoln | | |
| State NE Zip Code 68508 Ho | ome Phone number <u>214</u> | -808-4709 | |
| Social Security Number | Date of Birth Canua | N 19, 1962 | |

| List names of all Officers, Directors, Stockholde | ers, Members and their Spouses | | | | |
|---|--------------------------------|--|--|--|--|
| Last Name Tesfatsion | | | | | |
| Social Security Number | | | | | |
| Title President | | | | | |
| Spouse Name (indicate N/A if single) Yeshi N. Te | | | | | |
| Spouse Social Security Number None | | | | | |
| Title None | Number of Shares None | | | | |
| Last Name | First Name | | | | |
| Social Security Number | Date of Birth | | | | |
| Title | Number of Shares | | | | |
| Spouse Name (indicate N/A if single) | | | | | |
| Spouse Social Security Number | Date of Birth | | | | |
| Title | Number of Shares | | | | |
| Last Name | | | | | |
| Social Security Number | | | | | |
| Title | | | | | |
| Spouse Name (indicate N/A if single) | | | | | |
| Spouse Social Security Number | | | | | |
| Citle | | | | | |

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NOV 15 2006

NEBRASKA LIQUOF

Is this Corporation or Limited Liability Company controlled by another Corporation? If yes, give name of corporation and supply organizational chart CONTROL COMMISSIO Indicate tax year with the IRS Starting Date 01/01/2006 __Ending Date 12/31/2006 Signature of President/Managing Member Notary Public Signature & Seal Subscribed in my presence and sworn to before me this

In compliance with the ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

ublic Signature & Seal

GENERAL NOTARY-State of Nebraska

NANCY L. WILKEN

APPLICATION FOR LIQUOR LICENSE CORPORATION MANAGER - FORM 3b *MUST BE A NEBRASKA RESIDENT*

301 CENTENNIAL MALL SOUTH PO BOX 95046 LINCOLN, NE 68509-5046 PHONE: (402) 471-2571 FAX: (402) 471-2814 Website: http://www.lcc.ne.gov/



NOV 15 2006

NEBRASKA LIQUOR CONTROL COMMISSION

| LIQUOR LICENSE INFORM | IATION |
|----------------------------------|--|
| NAME OF LICENSED CORPORATI | ON BNW Corporation |
| CLASS & LICENSE NUMBER C | |
| TRADE NAME South Street Liquor | |
| STREET ADDRESS 1000 South Street | CITY_Lincoln |
| Ally | |
| SIGNATURE OF CORPORAT | TION PRESIDENT/CEO |
| APPLICANT INFORMATION | (MUST BE 21 OR OVER AND NEBRASKA RESIDENT) |
| NAME Fiseha Tesfatsion | |
| ADDRESS 1228 "E" Street, Apt. 7 | |
| CITY Lincoln | STATENE ZIP CODE 68508 |
| HOME PHONE NUMBER (214) 808-40 | |
| SEX MALE FEMALE | SOCIAL SECURITY NUMBER |
| DATE OF BIRTH | PLACE OF BIRTH Asmara, Eritrea |
| DRIVERS LICENSE NUMBER & STA | TE 6812080634 |
| SPOUSES INFORMATION (IE | NOT MARRIED INDICATE) |
| SPOUSE NAME Yeshi N. Temolso | |
| SOCIAL SECURITY NUMBER NO | oneDATE OF BIRTH |
| DRIVERS LICENSE NUMBER & STA | |
| | |

| I. REA | D CARE | FULLY. ANSWER C | OMPL | ETELY | AND | ACCURATELY. | | | | |
|-------------------------------------|----------------------------|---|----------------------|-----------------------|--|----------------------------------|---|---|---|--|
| of the cha
application
YES | arge, where
on. If more | party to this application, or
ony, misdemeanor, violation
the charge occurred and the
than one party, please list ch
NO | year and
arges by | month of
each indi | f the con | violation of a local law, o | y to any ch
ordinance o
any charges | arge. Charg
r resolution
s pending at | ge means any . List the natur the time of thi | |
| If yes, p | lease exp | lain below or attach a se | eparate j | page. | | | | | | |
| Speedin
Speedin | ıg; Geneva | , TX; February 2006
, NE; October 2006
; Dallas, TX; May 1999 | | | | | | | | |
| 2. Have y
license nu
VYES | | spouse ever made application
ate. Dallas, TX; V357109
NO Temple, TX; BQ579 | 51 & Q2 | 5710550 | ense or 1 | manager for any liquor lic
05 | ense? IF Y | ES, for wh | at premise give | |
| 3. Have y | ou or your s | spouse ever made a compron
NO | nise settle | ement for | violatio | n of such laws? | | | | |
| YES | | erprint cards and PROPER | | | | | | | | |
| | RE | SIDENCES FOR THE DA | CT to M | C A DCI | | | | \$5.812.35° 24(36) | | |
| APPLICANT: CITY & STATE | | YEAR
FROM TO | | | PLICANT AND SPOUSE MUST COMP
SPOUSE: CITY & STATE | | YEAR FROM TO | | | |
| Asmara, Eritrea | | 1962 | 1997 | Asma | ara, Eritrea | | 1962 | 2006 | | |
| Dallas, | | | 1997 | 2005 | | | | | | |
| Temple, TX | | | 2005 | | | | - | | | |
| Lincoln, | , NE | MARIE CONTRACTOR CONTRACTOR | 2006 | 2006 | | | | | | |
| | | EMPLO | YERS - | LIST L | AST TW | O EMPLOYERS | | | | |
| MONTH/YEAR NAME OF EMPLOYER FROM TO | | | | | | NAME OF SUPERVISOR | TE | TELEPHONE NUMBER | | |
| 10/04 | 06/06 | Semerina Corpo | ration | 400 | | Self | (2 | (214) 747-1976 | | |
| 05/05 | 07/06 | Self | | | | Self | | 254-774-8461 | | |
| | | | | | | | ~ ~ | , , , , , –† – | UTUI | |

PERSONAL OATH AND CONSENT OF INVESTIGATION MUST BE SIGNED BY APPLICANT & SPOUSE

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application, that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law. (Sec. §53-131.01) Nebraska Liquor Control Act.

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has NO interest directly or indirectly, an affidavit of non participation may be attached.

The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete, inaccurate, or fraudulent.

| Alle | |
|--|---|
| Signature of Applicant | Signature of Spouse |
| Subscribed in my presence and sworn to before me this 3 day of November, 2000. | Subscribed in my presence and sworn to before me thisday of |
| Mary Signature & Seal | Notary Signature & Seal |
| | . with y signature & seat |

GENERAL NOTARY-State of Nebraska
NANCY L. WILKEN
My Comm. Exp. April 15, 2010

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NEBRASKA LIQUOR CONTROL COMMISSION

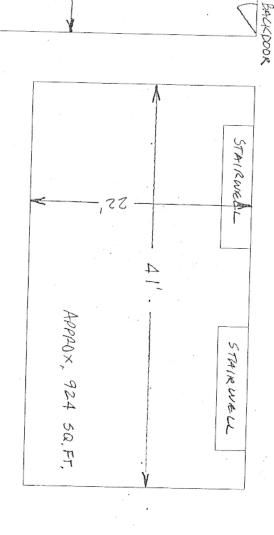
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CONTROL COMMISSION

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